



APPLICATION FOR DEDUCTION FROM ASSESSED VALUATION OF STRUCTURES IN ECONOMIC REVITALIZATION AREAS

State Form 18379 (R8 / 1-06)

Prescribed by the Department of Local Government Finance

**FORM
322 ERA**

INSTRUCTIONS:

1. This form is to be filed in person or by mail with the Auditor of the county in which the property is located before May 10 of the year in which addition to assessed valuation (or new assessment) is made, or not later than thirty (30) days after mailing date of notice of assessment (Form 11) if such notice is not given before April 10 of that year (IC 6-1.1-12.1-5).
2. Copy of Form 11 must be attached.
3. A property owner may not receive this deduction for the same property or improvements for which a deduction is obtained under either IC 6-1.1-12-18, IC 6-1.1-12-22 or IC 6-1.1-12-28.5 (IC 6-1.1-12-6).
4. A copy of the statement of benefits (Form SB-1) must be attached to this application.
5. The compliance with statement of benefits (Form CF-1) must be filed with this application and the designating body (IC 6-1.1-12.1-5.1).
6. A copy of the resolution must be attached to this application.
7. Please see IC 6-1.1-12.1 for further instructions.
8. Taxpayer completes Sections I, II and III below.
9. If property located in an economic revitalization area is also located in an allocation area as defined in IC 36-7-14-39 or IC 36-7-15.1-26, an application for the property tax deduction may not be approved unless the Commission that designated the allocation area adopts a resolution approving the application (IC 6-1.1-12.1-2(k)).
10. Except for ERA's designated before December 31, 1987, a deduction for redevelopment or rehabilitation is not authorized for the following facilities (IC 6-1.1-12.1-3).
 - a. Private or commercial golf course
 - b. Country club
 - c. Massage parlor
 - d. Tennis court
 - e. Skating facility, including roller skating, skateboarding or ice skating
 - f. Racquet sport facility (including handball or racquet ball court)
 - g. Hot tub facility
 - h. Suntan facility
 - i. Racetrack
 - j. Any facility, the primary purpose of which is (a) Retail food and beverage service; (b) Automobile sales or service; or (c) other retail; (unless the facility is located in an economic development-target area established under IC 6-1.1-12.1-7).
 - k. Residential, unless the facility is a multi-family facility that contains at least 20% of the units available for use by low and moderate income individuals or unless the facility is located in an economic development target area established under IC 6-1.1-12.1-7, or the area is designated as a residentially distressed area which is required to meet conditions as cited in IC 6-1.1-12.1-2 (c) (1 & 2).
 - l. Package liquor store [see IC 6-1.1-12.1 - 3(e)(12)]

SECTION I - DESCRIPTION OF PROPERTY

The owner hereby applies to the County Auditor for a deduction pursuant to IC 6-1.1-12.1-5 beginning with the assessment date March 1, 20 ____.

County	Township	DLGF taxing district number	Key number
Name of owner			
Property address (number and street, city, state, and ZIP code)			
Legal description from Form 11			Date of Form 11 (month, day, year)
Type of structure			Use of structure
Governing body that approved ERA designation			Resolution number
Date ERA designation approved (must be before March 1)			

SECTION II - VERIFICATION OF OWNER OR REPRESENTATIVE

Signature of owner or representative (I hereby certify that the representations on this application are true)	Date signed (month, day, year)
Address (number and street, city, state, and ZIP code)	

SECTION III - STRUCTURES

AUDITOR'S USE

	SECTION III - STRUCTURES	AUDITOR'S USE
A. Rehabilitation structure	1. Assessed valuation AFTER rehabilitation	\$
	2. Assessed valuation at 100% of TTV BEFORE rehabilitation	\$
	3. INCREASE in assessed valuation	\$
	4. Assessed valuation eligible for deduction	\$
B. New structure	1. Assessed valuation	\$
	2. Assessed valuation eligible for deduction	\$

SECTION IV - VERIFICATION OF TOWNSHIP (OR TRUSTEE) ASSESSOR

I verify that the above described structure was assessed and the owner was notified on _____ with the effective date of the assessment being March 1, 20 ____ and that the assessed valuations in Section III are correct.

Signature of Township (or Trustee) Assessor	Township	Date (month, day, year)
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CONTINUED ON THE REVERSE SIDE

**SECTION V - FOR AREAS NOT RESIDENTIALLY DISTRESSED
PERCENTAGES AND AMOUNTS OF DEDUCTIONS**

YEAR OF DEDUCTION / PERCENTAGE / AMOUNT OF DEDUCTION *	YEAR OF DEDUCTION / PERCENTAGE / AMOUNT OF DEDUCTION *
(1) For deductions allowed over a 1 year period: 1st _____ pay _____ 100% \$ _____	(8) For deductions allowed over a eight (8) year period: 1st _____ pay _____ 100% \$ _____ 2nd _____ pay _____ 88% \$ _____ 3rd _____ pay _____ 75% \$ _____ 4th _____ pay _____ 63% \$ _____ 5th _____ pay _____ 50% \$ _____ 6th _____ pay _____ 38% \$ _____ 7th _____ pay _____ 25% \$ _____ 8th _____ pay _____ 13% \$ _____
(2) For deductions allowed over a two (2) year period: 1st _____ pay _____ 100% \$ _____ 2nd _____ pay _____ 50% \$ _____	(9) For deductions allowed over a nine (9) year period: 1st _____ pay _____ 100% \$ _____ 2nd _____ pay _____ 88% \$ _____ 3rd _____ pay _____ 77% \$ _____ 4th _____ pay _____ 66% \$ _____ 5th _____ pay _____ 55% \$ _____ 6th _____ pay _____ 44% \$ _____ 7th _____ pay _____ 33% \$ _____ 8th _____ pay _____ 22% \$ _____ 9th _____ pay _____ 11% \$ _____
(3) For deductions allowed over a three (3) year period: 1st _____ pay _____ 100% \$ _____ 2nd _____ pay _____ 66% \$ _____ 3rd _____ pay _____ 33% \$ _____	(10) For deductions allowed over a ten (10) year period: 1st _____ pay _____ 100% \$ _____ 2nd _____ pay _____ 95% \$ _____ 3rd _____ pay _____ 80% \$ _____ 4th _____ pay _____ 65% \$ _____ 5th _____ pay _____ 50% \$ _____ 6th _____ pay _____ 40% \$ _____ 7th _____ pay _____ 30% \$ _____ 8th _____ pay _____ 20% \$ _____ 9th _____ pay _____ 10% \$ _____ 10th _____ pay _____ 5% \$ _____
(4) For deductions allowed over a four (4) year period: 1st _____ pay _____ 100% \$ _____ 2nd _____ pay _____ 75% \$ _____ 3rd _____ pay _____ 50% \$ _____ 4th _____ pay _____ 25% \$ _____	<p>* If a general reassessment of real property occurs within the deduction period, the amount of the deduction shall be adjusted to reflect the percentage increase or decrease in assessed valuation. If an appeal of an assessment is approved that results in a reduction of the assessed value, the deduction amount shall be adjusted to reflect the percentage decrease that resulted from the appeal. (IC 6-1.1-12.1-4 (b))</p>
(5) For deductions allowed over a five (5) year period: 1st _____ pay _____ 100% \$ _____ 2nd _____ pay _____ 80% \$ _____ 3rd _____ pay _____ 60% \$ _____ 4th _____ pay _____ 40% \$ _____ 5th _____ pay _____ 20% \$ _____	
(6) For deductions allowed over a six (6) year period: 1st _____ pay _____ 100% \$ _____ 2nd _____ pay _____ 85% \$ _____ 3rd _____ pay _____ 66% \$ _____ 4th _____ pay _____ 50% \$ _____ 5th _____ pay _____ 34% \$ _____ 6th _____ pay _____ 17% \$ _____	
(7) For deductions allowed over a seven (7) year period: 1st _____ pay _____ 100% \$ _____ 2nd _____ pay _____ 85% \$ _____ 3rd _____ pay _____ 71% \$ _____ 4th _____ pay _____ 57% \$ _____ 5th _____ pay _____ 43% \$ _____ 6th _____ pay _____ 29% \$ _____ 7th _____ pay _____ 14% \$ _____	

**SECTION VI - FOR RESIDENTIALLY DISTRESSED AREAS (AS DEFINED BY IC 6-1.1-12.1-2b-d)
AMOUNT OF DEDUCTION**

TYPE OF DWELLING	DEDUCTION IS THE LESSER OF: (IC 6-1.1-12.1-4.16)	DEDUCTION IS ALLOWED FOR A FIVE (5) YEAR PERIOD WHICH INCLUDES YEARS:
<input type="checkbox"/> One (1) family dwelling	Assessed value (after rehabilitation or redevelopment) \$ _____ or \$74,880 AV	_____ pay _____ through _____ pay _____
<input type="checkbox"/> Two (2) family dwelling	Assessed value (after rehabilitation or redevelopment) \$ _____ or \$106,080 AV	_____ pay _____ through _____ pay _____
<input type="checkbox"/> Three (3) unit multifamily dwelling	Assessed value (after rehabilitation or redevelopment) \$ _____ or \$156,000 AV	_____ pay _____ through _____ pay _____
<input type="checkbox"/> Four (4) unit multifamily dwelling	Assessed value (after rehabilitation or redevelopment) \$ _____ or \$199,680 AV	_____ pay _____ through _____ pay _____

Assessed value limits for taxes due and payable prior to January 1, 2005 were \$36,000, \$51,000, \$75,000, and \$96,000 for one to four family dwellings respectively.

SECTION VII - APPROVAL OF COUNTY AUDITOR (COMPLETE ONLY IF APPROVED)

This application is approved in the amounts shown above.

Signature of County Auditor	Date signed (month, day, year)
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